CITY OF PETERBOROUGH

REPORTS

OF THE

Medical Officer of Health

AND OF THE

Chief Public Health Inspector

FOR THE YEAR

1956

CASTERS, THE PRINTERS, CROMWELL ROAD, PETERBOROUGH

CITY OF PETERBOROUGH

I.

REPORT

OF THE

Medical Officer of Health

FOR

1956

CITY OF PETERBOROUGH

ANNUAL HEALTH REPORT, 1956

PUBLIC HEALTH COMMITTEE
(as at 31st December, 1956)

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Vice-Chairman :

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Medical Officer of Health :

G. DISON, M.C., L.R.C.P., & S. (ED.), D.P.H., D.R.C.O.G.

Assistant Medical Officer of Health :

DIANA MCKNIGHT, M.B., B.S., D.C.H. (from May, 1956)

To : The Right Worshipful the Mayor, Aldermen and Councillors of the City of Peterborough.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting my second Annual Report on the health of the City of Peterborough. The year has been notable in several respects.

The Food Hygiene Regulations of 1955 came into effect during the year and as a result of the increased legal powers it is felt that much good will accrue. These regulations, however, have imposed a very severe strain on the staff of the Chief Public Health Inspector, for many firms have sought the advice of the department and many inspections had to be made as a result of these regulations.

The Clean Air Act of 1956 will go a long way to rid the country of atmospheric pollution and, together with the Food Hygiene Regulations, will make a decided contribution towards the better health of all citizens. It is to be hoped that all authorities will take advantage of the opportunities given under the Clean Air Act and that Peterborough will be well in the van.

Mr. Hall, the Chief Public Health Inspector, in his report, mentions that there are now 288 caravans in the city, which shows a substantial increase over last year. The one encouraging feature is that these are now aggregated on 44 sites as opposed to 56 sites in the previous year. This policy of grouping of caravans certainly makes it easier to supply some amenities for those who live in them. I need hardly reiterate what I said in the Report for last year about the necessity for providing good housing in order to maintain and improve health.

It is pleasing to note that 100% of meat killed in this city is inspected by a member of Mr. Hall's staff. This work naturally throws a great strain on the department. In my last Report I did comment that the disease Cysticercus bovis seemed to be on the increase and this has been borne out by the fact that, during 1956, 39 cases of the disease were found, showing an increase of 16 over the previous year. If this disease continues to increase, more drastic measures might have to be taken.

It is interesting to note that a large variety of samples were taken during the year, amongst them being samples of cod liver oil. Analysis proved that all these were up to standard as regards the prescribed vitamin content and it would seem that, in Peterborough, the chemists do not hold stocks of this product long enough for the vitamin content to deteriorate—a very salutary state of affairs.

1956 was the celebration of the centenary of the Society of Medical Officers of Health and I thought it might be interesting to trace the history of public health from the Medical Officers' point of view in Peterborough and I have appended such a brief history. I trust this will be of interest to you.

During the year, Dr. McKnight was appointed Assistant County Medical Officer, School Medical Officer, and Assistant Medical Officer of

Health for the city. She commenced her duties in May and has proved a very able and willing colleague. Also, during 1956, a part-time shorthand typist was appointed. This appointment enabled the work of the department to be carried out more expeditiously.

My thanks are due to the Chairman and Members of the Public Health Committee for the kindness they have shown me, to Mr. Hall, the Chief Public Health Inspector, for his willing assistance; to Dr. Nisbet, the County Medical Officer, for his co-operation; to Mr. Colman, for his report on the weather conditions and to my own clerical staff for the willing way in which they undertook all duties during the year.

Yours faithfully,

G. DISON

SECTION 1

STATISTICS

Population.

The Registrar General's estimated mid-year population for Peterborough is 54,380, which shows an increase of 170 over that of last year. The natural increase of the population, i.e. excess of births over deaths was 359. The fact that the natural increase is more than double the actual increase shows that people must still be drifting away from Peterborough. I feel, however, that the working population of Peterborough has, in fact, increased as many people working in Peterborough live outside the city.

Birth Rate.

The Live Birth Rate per 1,000 population was 18.02, which is the highest since 1946 when the rate of 19·02 was recorded. The national figure for 1956 was 15·6. Both these figures show an increase on last year. Of the 980 babies born, exactly half were males, a rather strange coincidence, for there are usually more males born than females. There were 59 illegitimate children born in the city, and, of these, 31 were females.

Unfortunately there were 27 stillbirths during the year, an increase of 10 over last year. Only 2 of these stillbirths were illegitimate. The Still Birth Rate having climbed to 26·81 per 1,000 total births, it is considerably higher than the national figure of 22·9.

Death Rate.

The crude Death Rate for the year was 11·42 per 1,000 population and, as the comparability factor this year is 1·00, the Index Death Rate was also 11·42, which is slightly higher than for the previous year, but still lower than the figure of 11·7 for England and Wales.

There were 311 deaths due to circulatory diseases. Of these 104 were due to vascular lesions of the nervous system, a slight increase over the previous year, while coronary diseases accounted for 81, a reduction of 15.

Malignant diseases accounted for 104 deaths, an increase of 1 over 1955. Of these deaths, 22 were due to carcinoma of the lung and bronchus, 19 of these deaths being in men. Once again the question of the significance between the rise in carcinoma of the lung and bronchus and smoking must be stressed. It is quite surprising how many schoolchildren smoke and, until they can be persuaded not to start the habit or, if they have already acquired it, to give it up, there will inevitably be an increase in lung cancer. At a recent school medical inspection a school leaver was asked how many cigarettes he smoked a day; his answer, both indignant and illuminating, was " Smoke, sir; I do not smoke. I have not smoked since I was 8 years old." A rigorous campaign must be started amongst schoolchildren in order that this pernicious habit can be nipped in the bud.

There was an increase in the number of deaths due to diseases of the respiratory system, but there was a welcome decrease in the number of deaths due to pulmonary tuberculosis. Motor vehicle accidents accounted for 5

deaths, exactly half the number for 1955, but other accidents increased from 13 to 15. There was a welcome drop in the number of suicides during the year, the figure having dropped from 10 to 4.

Once again I have pleasure to report that there have been no deaths due to diphtheria, whooping cough, measles or acute poliomyelitis.

Infant Mortality Rate.

30 infants, i.e. children under the age of 1 year, died during the year. This is an increase of 6 over the previous year, and the Infant Mortality Rate has increased from 26·52 to 30·61. This rate is considerably higher than the national figure, which is 23·8, and is all the more regrettable in that the neo-natal mortality rate of 19·39 is lower than that of 20·99 for the city for 1955.

11 children over the age of 1 month died as compared with 5 in the previous year. Only 3 of these 11 children died in hospital; the rest succumbed at home.

In 12 instances prematurity appeared to be the predisposing cause of death.

Maternal Mortality Rate.

There was again 1 death due to childbirth, which represented a maternal mortality rate of ·99 per 1,000 total births.

SECTION II

INFECTIOUS DISEASES

The number of notifications of infectious diseases received showed a very considerable drop over the previous year, although there was an increase in the number of cases of puerperal pyrexia and food poisoning.

Scarlet Fever.

There were only 13 cases of scarlet fever during the year and the disease continues to be of a mild nature.

Diphtheria.

Once again it is extremely pleasing to report that there were no cases of diphtheria in the city. This happy state of affairs is due to the immunisation procedure carried out in the past. However, the immunisation rate throughout the country is dropping and, unless a change of heart on the part of parents takes place, diphtheria may well rear its ugly head once more.

Measles.

During 1956 there were only 13 cases of measles notified, whereas in the previous year there were 1206. This state of affairs is, of course, to be expected following the epidemic of last year.

Whooping Cough.

The number of cases of whooping cough notified during the year was only 7 as compared with 280 in 1955. Whooping cough can be a serious illness in the very young and at all times can be a distressing complaint. There is evidence that the immunisation rate is improving in Peterborough and this might have some effect on the considerable drop in the cases notified. One must not, however, be complacent, for it is almost inevitable that this low figure will not be maintained.

Acute Pneumonia.

There was a slight drop in the number of cases of acute pneumonia notified, the figure this year being 37 as compared with 41 in the previous year. 17 of the 37 cases occurred in persons over the age of 45.

Puerperal Pyrexia.

The number of cases of puerperal pyrexia notified unfortunately increased from 30 in 1955 to 40 in 1956. Of these, 35 occurred in women between the ages of 20 and 35. With the exception of 1 case all the women were confined in hospital.

Acute Poliomyelitis.

There were 3 isolated cases of acute poliomyelitis as compared with 7 in the previous year. One case in a child of one year old was of a paralytic

nature. It was not possible to establish any connection between any of the cases notified and there were no deaths due to this disease.

The fact that vaccination against poliomyelitis has now been commenced in the city and the country generally will no doubt have a bearing on the course of this distressing disease. It is, however, too early to assess the value of vaccination for, with the limited supplies of vaccine, it has been possible to immunise only a small proportion of children.

Dysentery.

There was a welcome drop in the number of cases of dysentery notified. There were 18 as compared with 40 in the previous year. The cases were spread through all the age groups. 14 of these cases occurred in the Day Nursery and the outbreak there continued for some time, despite exclusion of cases and the vigorous methods adopted by the Nursery staff. How the original case was infected was not known.

Tuberculosis.

A total of 35 cases of tuberculosis was notified during the year. Of these, 32 were cases of respiratory tuberculosis; an increase of 2 over the previous year. It is interesting to note that, whereas in 1955, the number of males suffering from respiratory tuberculosis outnumbered the females by more than two to one, in the present year more females were notified than males. It is also of interest that of the 17 cases of tuberculosis notified amongst females, 9 of these occurred in the age-group 25 to 35.

The tuberculosis death rate, however, fell from 0·15 per 1,000 population in 1955 to 0·09 per 1,000 population in 1956. This compares favourably with the figure of 0·12 for England and Wales.

Food Poisoning.

During the year there were 62 cases of food poisoning notified, which is a considerable increase over the previous year.

There were 3 outbreaks of food poisoning accounting for 58 of the cases. Of the 4 single cases of food poisoning notified, 3 were due to Salmonella typhimurium and one to Salmonella newcastle. The agent causing outbreaks was identified in 2 instances, but could not be discovered in the third.

The one outbreak occurring amongst members of a local firm attending a dinner accounted for 49 cases. This outbreak of food poisoning was only brought to the notice of the Health Department through an enquiry from the press, who gave information that there appeared to be a large number of people ill after attending a dinner. Enquiries at the firm concerned proved the statement to be correct. Investigations were immediately instituted but, due to the late receipt of information, no food consumed at the dinner was available for analysis. The nature of the illness led one to believe that it was due to a staphylococcal toxin and subsequent investigations into the preparation of food and of bacteriological examination of the staff proved this to be the most reasonable explanation. The main meat dish for the dinner had been cooked early in the morning, cooled slowly and then re-heated in time for the dinner. Stuffing, which was made by the chef and rolled by hand, was

made from the previous day's gravy and allowed to stand at room temperature. Swabs from the hand of the chef showed that he was a carrier of staphylococcus pyogenes. There is no need to stress the importance of cleanliness of hands and the dangers of the use of old gravy and re-heated foods when one sees the result in an outbreak of this nature. One-third of the diners was affected. Fortunately, the disease was mild in character and no deaths resulted.

The second outbreak where an organism was identified, occurred at a school in the city. 7 cases of food poisoning were ascertained to be due to Clostridium welchii. This organism was isolated from a pie which had been consumed by the pupils, this pie having been made from fresh sausage meat, plus liver, which had been left over from the previous day's lunch. The pie had been made in the morning, cooled and stored at room temperature until it was re-heated in time for the meal at 5 p.m. Once again, one sees the danger of using left-overs.

Food poisoning is a preventable disease and, with due care and attention, no cases should occur. The implementation of the Food Hygiene Regulations, 1955, will go a long way in the fight for clean food.

SECTION III

ENVIRONMENTAL HYGIENE

The Weather.

During the last six months of 1955 the monthly rainfall was below the average, but 1956 opened with January having more than twice the average rainfall. The next four months, however, were comparatively dry and during this period only 2·85″ of rain fell, which is 46% of the average. There was an absolute drought from 18th April to 8th May and partial drought from 14th April to 25th May, during which period of 45 days, only ·27″ of rain fell. It then seemed as if the weather man must have had a spite against us, for, from the 29th May to the 7th September, a period of 102 days, 11·04″ of rain fell. The period 27th July to the 6th August was the wettest with 2·97″, and Bank Holiday was the second wettest day of the year, ·82″ of rain having fallen. There followed another 3 dry months and December was fairly moderate.

The result of the two dry spells was that the annual average was not quite reached. December 25th was the wettest Christmas Day since 1934, snow falling at night. When the bald figures are looked at one must agree with the experts that the year was not as wet as the average, but anyone who was in Peterborough during the summer will know that it was a very poor and wet summer.

Meticulous records of the rainfall at 74 London Road, Peterborough, were kept by Mr. E. H. Colman, and Table VII showing the rainfall month by month will be found in the Appendix.

Housing.

The number of persons on the waiting list on 1st January, 1957, was 988 which shows a drop of 119 as compared with the figure at 1st January, 1956. This is very encouraging, but in view of the fact that the Council has decided to increase the range of those who may apply for housing accommodation, there is no doubt that this drop will not be maintained.

It is pleasing to note that good progress has been maintained during the year in connection with the clearance of Westwood Camp Sites, and that at the end of 1956 only half the number of huts remained in occupation.

It is pleasing to record that Westwood Airfield has been cleared of squatters.

Water Supply.

Once again there has been no change in the course, distribution and treatment of the Corporation's main supply, nor was any new plant installed.

In January there was a minor scare, as water which had been submitted by a neighbouring authority for analysis showed contamination. The Peterborough Corporation were the suppliers of this water and immediately steps were taken to increase the amount of chlorine being put into the water. As soon as this was instituted it was ascertained that the sample of water which was contaminated was not, in fact, from a main supply, but had come from a well. There was, however, a round table conference on the question of

contamination of water supplies and methods to obviate this contamination were discussed. Much useful information was gathered and more frequent sampling was instituted. During the year all treated water was satisfactory, although there was a great variation in the bacteriological quality of the untreated water.

The average daily consumption in the City was 2,973,000 gallons, which represents an increase of 178,000 gallons over last year and represents a consumption of 54·7 gallons per head per day. In addition, 1,381,000 gallons were supplied to neighbouring authorities. This represents a decrease of 47,000 gallons per day. The number of dwellings within the City with direct water supplied by tap in the house was 17,403 and the number supplied by standpipe was 502.

Public Slipper Baths.

The number of persons using the Corporation's Public Slipper Baths was 34,175 which represents a weekly average of 657. This represents a decrease of 7 persons a week as compared with 1955. Once again the number of males who made use of the facilities was far in excess of the females. It is interesting to note that 898 old-age pensioners made use of the baths as compared with 463 in the previous year.

Public Open-Air Swimming Pool.

The Swimming Pool was open to the public from 5th May to 9th September between the hours of 7 a.m. and 9 p.m. The number of bathers during this period was 90,119 and the number of spectators was 15,179. This shows a considerable decrease in both swimmers and spectators over the figures of 1955, which were 142,460 swimmers and 29,475 spectators. This decrease was no doubt due to the wet summer.

Regular samples of water were taken from the pool and submitted for laboratory examination. All the samples showed the water to be of suitable bacterial and chemical quality for use in the Swimming Pool.

Public Cleansing and Scavenging.

There are approximately 20,400 moveable ashbins in the City. The emptying of these presents a major problem, but at no time during the year were complaints received in connection with this service.

Drainage and Sewerage.

With the exception of some short lengths of sewer, the whole of the sewerage and sewage purification works at Fengate have been completed and are in full operation.

Work on the pumping station at Longthorpe was started in January, 1956, and completed in October. The laying of sewers in Paston and Gunthorpe have been completed and work on the Longthorpe, Marholm Road and Bishop's Road areas was commenced and a substantial portion of the sewers was laid before the end of the year.

Closet Accommodation.

There are still a number of properties not on the water carriage sewerage system. This is shown by the fact that in the Longthorpe area, 43 buckets and one tank are regularly emptied by the City Engineer's Department, while in the Newark area there are 27 buckets which are so emptied.

In view of the fact that the sewers in the Longthorpe area have now been completed it is hoped that all those houses not yet connected to the sewer will soon make arrangements to be connected and that there will be no further emptying of buckets in Longthorpe.

Noise Nuisance.

Only one complaint of noise nuisance was investigated. This investigation followed complaints from residents in the affected area to various officers of the Council. It was alleged that noise coming from an engineering works was interfering with the health and the amenities of the residents in the area. As the works in question is very close to the Old Fletton Urban District Council border, and as many of the complainants lived in Old Fletton, a visit was paid to the works together with the Medical Officer of Health and Chief Public Health Inspector of that Authority. On this occasion it was felt that the noise was not of sufficient character to warrant any action. A second visit was paid to the engineering works and to other works in the area and on this occasion it was felt that the noise emanating from other works greatly exceeded the noise coming from the premises of the firm indicted.

A discussion was had with the firm concerned and they agreed to call in a chartered consulting engineer to investigate. Subsequently, this consulting engineer, together with your officers made a tour of the area, and the consulting engineer made a report on noise level measurements made in the neighbourhood of the works. Through the courtesy of the firm in question a copy of this report was circulated to all members of the Health Committee. The conclusions reached by the consulting engineer were that the noise which emanated from the engineering works was such as must be expected from any engineering works and that it was produced during normal working hours. He further stated that from the measurements he made, the noise in respect of the rivetting from neighbouring works was the only noise which could be considered as persistent and unpleasant.

During investigations complaints were made regarding the noise made by the works in question on Sundays. It was, however, established that this firm did not in fact, work on Sundays, whereas other works in the area did do so.

SECTION IV

MISCELLANEOUS

Health Education.

The programme of Health Education Lectures carried out during the year, together with the Clean Food Campaign which was run in October showed quite clearly that there is in Peterborough, a distinct desire on the part of the public to learn more of the ways and means of improving the health of the community generally. 44 talks were given to various organisations in the City and 1369 people attended these talks. Women's organisations far outnumbered those for men in their requests for lectures, but it must be borne in mind that there are more organisations for women than for men.

It was decided that a Clean Food Campaign should be run, and a two-day programme was organised. Two films were obtained and these were shown at six sessions to owners and managers of food premises, food handlers, staffs of the City and County Health Departments and surrounding Health Departments and to the general public. At each of these six sessions there were speakers who gave brief talks on food hygiene and answered questions. The programme and the attendances at the various sessions was as follows :—

Tuesday morning	—owners and manager of food premises ...	50
Tuesday afternoon	—food handlers	70
Tuesday evening	—food handlers	30
Wednesday morning	—staffs of Public Health Departments	80
Wednesday afternoon	—food handlers	40
Wednesday evening	—general public	180
	TOTAL ...	450

The Wednesday night meeting proved a very lively one and the panel answering the questions after the films had a hard task to keep up with the questioners. The running of this small Clean Food Campaign taught valuable lessons in organisation. It is possible to run small affairs of this nature at small cost and to get people to come along provided the personal approach is used. Circular letters were sent out to managers of all food premises in the City, inviting them and as many of their staff as possible, to attend the various meetings. The response on paper seemed quite good, but in point of fact, many firms completely ignored the letter. It is felt that many of these firms are the ones who most need enlightenment about clean food handling.

There was very little general advertising for the public meeting, a few posters being displayed in shops in the centre of the City, but organisations who had previously requested speakers were circularised and invited to come to this meeting and 20 of these organisations did send members.

International Certificates.

During the year 247 International Certificates were franked in the Department. These were made up as follows :—

Smallpox—195
Cholera — 38
Others — 14

National Assistance Act, 1948—Section 47.

Once again it was not found necessary to compulsorily remove any persons under the above Act during the year. The co-operation received from the County Health Department in providing the services of home helps or district nurses was sufficient to obviate any compulsory removals.

Medical Examinations.

39 medical examinations were carried out for persons entering the employment of the Corporation and 2 were carried out for the Combined Police Authority.

APPENDIX

GENERAL STATISTICS FOR 1956

Area of the City in Acres	10,022
Population :—Census 1951	53,412
Registrar-General's Estimate (Mid. 1955)	54,210
Registrar-General's Estimate (Mid. 1956)	*54,380
Density of Population : persons per acre	5·43
Number of Inhabited Houses (End of 1955)	17,642
Number of Inhabited Houses (End of 1956)	17,913
Housing Density; houses per acre	1·78
Mean number of occupants per house	3·04
Rateable Value as at 1st October, 1956	£799,955
Product of a Penny Rate	£3,294/5/10

* Statistics in this Report are based on this estimate of resident population.

VITAL STATISTICS FOR 1956

Live Births.

	Male	*Female*	*Total*
Legitimate	462	459	921
Illegitimate	28	31	59
Total Live Births	490	490	980

Live Birth Rate per 1,000 estimated resident population : 18·02

Still Births.

	Male	*Female*	*Total*
Legitimate	13	12	25
Illegitimate	2	—	2
Total Still Births	15	12	27

Still Birth Rate per 1,000 total (Live and Still) births :	26·81
Still Birth Rate per 1,000 population :	0·49
Total Birth Rate (Live and Still) per 1,000 population :	18·52

(Comparability factor 1·00)

Deaths.

	Male	*Female*	*Total*
Numbers during year	304	317	621

Crude Death Rate per 1,000 population :	11·42
Index Death Rate per 1,000 population :	11·42

(Comparability factor 1·00)

Maternal Mortality.

(Number of women dying as a result of childbirth—
Heading No. 30 in the Registrar-General's Short List)

	Deaths	*Rate per* 1,000 *Total Births*
Pregnancy, childbirth, abortion	1	·99

Infant Mortality.

(Deaths of infants under one year of age)

Male	*Female*	*Total*
16	14	30

Infant Mortality Rate per 1,000 Live Births : 30·61

Neonatal Mortality.

(Deaths of Infants under four weeks of age)

Male	*Female*	*Total*
10	9	19

Neonatal Mortality Rate per 1,000 Live Births : 19·39

OTHER STATISTICS, 1956

Deaths from Coronary Disease, Angina (all ages)	81
,, ,, Other Cardiac Conditions (all ages)	93
,, ,, Malignant Neoplasm (all ages)	104
,, ,, Measles (all ages)	0
,, ,, Whooping Cough (all ages)	0

TABLE I

BIRTH-RATES, DEATH-RATES, ANALYSIS OF MORTALITY, MATERNAL DEATH-RATES, AND CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR, 1956

Figures for the City of Peterborough, and, where available, for England and Wales.

	City of Peterborough		*England and Wales*
	Nos.	*Rates per* 1,000 *Civilian Population*	
BIRTHS :—			
Live	980	18·02	15·6
Still	27	0·5	0·37
DEATHS :—			
All causes	621	11·42	11·7
Typhoid and Paratyphoid Fevers	0	0·00	—
Whooping Cough	0	0·00	0·00
Diphtheria	0	0·00	0·00
Tuberculosis	5	0·09	0·12
Influenza	0	0·00	0·06
Smallpox	0	0·00	—
Acute Poliomyelitis (including Polioencephalitis)	0	0·00	0·00
Pneumonia	36	0·66	0·52
NOTIFICATIONS :—			
Typhoid Fever	0	0·00	0·00
Paratyphoid Fever	0	0·00	0·01
Meningococcal Infection ...	1	0·02	—
Scarlet Fever	13	0·24	0·74
Whooping Cough	7	0·13	—
Diphtheria	0	0·00	0·00
Erysipelas	1	0·02	—
Smallpox	0	0·00	—
Measles	13	0·24	—
Pneumonia	37	0·68	0·57
Acute Poliomyelitis (including) Polioencephalitis) :—			
Paralytic	1	0·02	0·04
Non-Paralytic	2	0·04	0·03
Food Poisoning	62	1·14	0·25
Acute Encephalitis	0	0·00	—
Malaria	0	0·00	—
Dysentery	18	0·33	1·10
Ophthalmia neonatorum ...	1	0·02	—

TABLE 1—*Continued*

	City of Peterborough		*England and Wales*
	Nos.	*Rates per* 1,000 *Live Births*	
MORTALITY :—			
Infant Deaths under one year of age	30	30·61	23·8
Infant Deaths under four weeks of age	19	19·39	
	Nos.	*Rates per* 1,000 *Total Births*	
Women dying as a result of childbirth	1	0·99	
NOTIFICATIONS :—			
Puerperal Pyrexia	40	39·72	

TABLE II
STATISTICAL ANALYSIS OF CAUSES OF DEATH, 1956

Causes of Death as given in the Registrar-General's Short List	*Numbers*			*Rates per* 1,000 *pop.*	*Rates per* 1,000 *Deaths*
	M.	F.	*Total*		
Tuberculosis, Respiratory ...	4	1	5	0.092	8·052
Tuberculosis, Other	0	0	0	0·000	0·000
Syphilitic Disease	2	3	5	0·092	8·052
Diphtheria	0	0	0	0·000	0·000
Whooping Cough	0	0	0	0·000	0·000
Meningococcal Infections ...	0	0	0	0·000	0·000
Acute Poliomyelitis	0	0	0	0·000	0·000
Measles	0	0	0	0·000	0·000
Other infective and parasitic diseases	1	0	1	0·018	1·610
Malignant Neoplasm; stomach	14	4	18	0·331	28·985
Malignant Neoplasm ; lung, bronchus	19	3	22	0·405	35·427
Malignant Neoplasm ; breast	0	9	9		
Malignant Neoplasm ; uterus	0	3	3		
Other Malignant and Lymphatic Neoplasms	25	27	52	0·956	83·736
Leukaemia, Aleukaemia ...	2	1	3	0·055	4·831
Diabetes	4	1	5	0·092	8·052
Vascular lesions of Nervous System	39	65	104	1·912	167·472
Coronary Disease, Angina ...	43	38	81	1·490	130·435
Hypertension with heart Disease	6	5	11	0·202	17·713
Other heart disease	39	43	82	1·508	132·045
Other circulatory disease ...	13	20	33	0·607	53·140
Influenza	0	0	0	0·000	0·000
Pneumonia	11	25	36	0·662	57·971
Bronchitis	18	13	31	0·570	49·919
Other diseases of respiratory system	3	4	7	0·129	11·272
Ulcer of stomach and duodenum	4	1	5	0·092	8·052
Gastritis, Enteritis and Diarrhoea	1	1	2	0·037	3·221
Nephritis and Nephrosis ...	1	5	6	0·110	9·662
Hyperplasia of Prostate ...	8	0	8		
Pregnancy, childbirth, abortion	0	1	1		
Congenital malformations ...	6	2	8	0·147	12·882
Other defined and ill-defined diseases	26	33	59	1·085	95·008
Motor vehicle accidents ...	4	1	5	0·092	8·052
All other accidents	9	6	15	0·276	24·155
Suicide	2	2	4	0·074	6·441
Homicide and operations of war	0	0	0	0·000	0·000
TOTALS ...	304	317	621		

TABLE III

CASES OF INFECTIOUS DISEASES (other than Tuberculosis) NOTIFIED DURING THE YEAR, 1956

Notifiable Diseases	Total cases at all ages	Total Cases Notified — Age Periods—Years												Total Deaths
		Under 1	1-	2-	3-	4-	5-	10-	15-	20-	35-	45-	65 and over	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	13	—	—	2	1	1	8	—	1	—	—	—	—	—
Diphtheria (including membranous croup)	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric or typhoid fever (excluding paratyphoid) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles (excluding rubella) ...	13	1	3	2	1	1	3	1	—	1	—	—	—	—
Whooping Cough	7	—	1	3	—	1	1	1	—	—	—	—	—	—
Acute pneumonia (primary and influenzal)	37	2	—	—	1	—	7	—	3	5	2	14	3	—
Puerperal Pyrexia	40	—	—	—	—	—	—	—	3	35	2	—	—	—
Meningococcal Infection ...	1	—	—	—	—	—	1	—	—	—	—	—	—	—
Acute Poliomyelitis :—														
(1) Paralytic	1	—	1	—	—	—	—	—	—	—	—	—	—	—
(2) Non-Paralytic	2	—	—	—	—	—	—	—	—	2	—	—	—	—
Acute encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	18	—	3	5	3	2	1	1	1	1	—	1	—	—
Ophthalmia neonatorum ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	1	—	—	—	—	—	—	—	—	—	—	—	1	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning...	62	—	—	1	1	—	3	4	19	18	13	3	—	—

TABLE IV

TUBERCULOSIS

New Cases and Mortality during 1956

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0-	—	—	—	—	—	—	—	—
1-	—	—	—	—	—	—	—	—
5-	—	—	—	—	—	—	—	—
10-	1	—	—	—	—	—	—	—
15-	1	3	—	—	—	—	—	—
20-	1	2	1	—	—	—	—	—
25-	3	9	—	2	—	—	—	—
35-	4	2	—	—	—	—	—	—
45-	2	1	—	—	—	—	—	—
55-	3	—	—	—	2	—	—	—
65- and upwards	—	—	—	—	3	—	—	—
Totals, 1956 ...	15	17	1	2	5	—	—	—
Totals, 1955 ...	21	9	2	5	7	1	—	—
Totals, 1954 ...	39	27	1	1	3	2	—	1

TABLE V

TUBERCULOSIS REGISTER AT 31st DECEMBER, 1956

	Respiratory		*Non-Respiratory*	
	M	F	M	F
No. on Register 1/1/56	163	149	9	6
Notified during 1956	21	22	1	2
Removed during 1956	12	11	—	—
No. on Register 31/12/56	172	160	10	8

TABLE VI

HOUSING STATISTICS

No. on Waiting List as at 1st January, 1956	1,107
New Applications received during year	526
TOTAL	1,633
No. of applicants housed or removed from Register during 1956 ...	346
Applications cancelled during year	299
TOTAL	645
No. on Waiting List as at 1st January, 1957	988
No. of houses erected by Council—1956	
2 and 3 bedroom type	256
Single Persons' Flats	40
TOTAL	296

TABLE VII

Rainfall at 74 London Road, Peterborough—1956

	Total Inches	*Difference from Average*		*% of Average*	*Wettest Day*	
		Deficit	*Excess*		*Day*	*Amount*
January	4·15		2·19	212	8	·86
February	·66	·80		45	18	·15
March	·62	·75		45	3	·28
April	·89	·61		59	13	·33
May	·68	1·24		35	29	·46
June	2·28		·59	135	8	·48
July	2·89		·72	133	8	·69
August	4·25		2·18	205	6	·82
September ...	1·52	·31		83	6	·46
October	1·01	·91		53	1	·66
November ...	·74	1·48		33	2	·19
December ...	1·90		·30	119	23	·31
TOTAL ...	21·59	6·09	5·98	99	Jan. 8	·86

Deficit : ·11

CITY OF PETERBOROUGH

II.

ANNUAL REPORT

OF THE

Chief Public Health Inspector

FOR THE YEAR

1956

(J. HALL, M.A.P.H.I., A.M.I.P.H.E.)

CHIEF PUBLIC HEALTH INSPECTOR'S DEPARTMENT

STAFF, 1956

Chief Public Health Inspector :

J. HALL, M.A.P.H.I., A.M.I.P.H.E., CERT.R.SAN.I.

Additional Public Health Inspectors :

(South) P. LANGSTON, M.A.P.H.I., CERT.R.SAN.I.

(North) K. R. ENDERBY, CERT.R.SAN.I.

(West) L. V. BAILEY, CERT.R.SAN.I. (Resigned 2/12/56)

A. MORTON (Pupil)

(East) A. N. VENTERS (Assistant)

Clerks :

G. LARRINGTON

MRS. F. WOOD (Part-time)

MRS. G. BASS (Resigned 8/8/56)

MRS. M. HORMAN (From 20/8/56)

PUBLIC HEALTH INSPECTORS' OFFICE,
TOWN HALL,
PETERBOROUGH.
1957.

To The Right Worshipful the Mayor, Aldermen,
and Councillors of the City of Peterborough.

MR. MAYOR, LADIES AND GENTLEMEN,

I have pleasure in submitting my report for the year 1956, this being my eighth Annual Report, and the forty-sixth in the series. By the nature of our work, the report, to be concise, must be composed mainly of tables of statistics.

After much discussion and many suggestions as to what might be an appropriate title to take the place of " Sanitary Inspector " (which despite the definitions contained in the Oxford Dictionary, does not describe our duties to the public mind and was felt was a bar to the recruitment of new Inspectors) an Act of Parliament was passed, changing our designation to " Public Health Inspector." It will be interesting to see whether or not this change of designation has the desired effect.

During this year until December, the qualified staff was up to establishment, but in December, Mr. Bailey left and to date no replies have been received to advertisements for an Additional Public Health Inspector. Mr. Morton continues his training by attending an approved course at Nottingham during this winter and the winter of 1957/8. His examination results in the second year of the Technical College Building Construction Course were excellent.

Meat Inspection and slaughtering have now developed a more settled pattern so that work can be planned ahead, making things much easier for the Inspector and the Slaughtermen. So that some idea might be obtained as to the amount of meat inspected, the approximate value to the Wholesale Butcher of the carcase meat has been calculated. For 1956 this is £857,900, and is greater than the rateable value of the entire City. It will be noticed from the table of carcases inspected and condemned in the report, that the percentage of animals affected with Tuberculosis is less than last year, but the animals affected with Cysticercosis has increased from ·54% to ·85%! Bye-laws relating to private slaughterhouses are being adopted. When these bye-laws have been formally approved, it will be possible to insist on cleansing and storage for which, at present, it is only possible to ask.

The Slum Clearance programme during this year commenced with 281 houses being reported when a list of priorities was drawn up. During this year 226 houses were inspected in detail. Action by the Department resulted in housing repairs being done and nuisances (caused by leaking roofs, etc.) being abated in 554 instances. For the purpose of comparison, it is calculated that the value of this latter work was nearly £4,000 and the work carried out on various food premises over £3,000, as the result of enforcement.

No mention has been made of the Houseboats on the River. These boats, in many cases, are totally unsuitable for living purposes and even in the best, during the winter, conditions must be deplorable. The Local Authority can do nothing about the use of these boats for permanent living purposes, but I believe that the River Boards will shortly be given power to make bye-laws controlling the use of the rivers. These may provide a solution.

For some years, no undesignated milk has been sold in the City area. A few gallons of milk daily was sold loose, but even this was tuberculin-tested milk. In October last, the City was included in a designated area specified in the Milk (Special Designation) (Specified Areas) Order, 1956, which means that, within the City and other Authorities in the designated area, no milk can be sold except in sealed containers, and the milk must be one of the following :— Tuberculin Tested, Pasteurised or Sterilised.

You will note, I have reverted to the practice of previous years, of detailing the Staff of the Department and the districts they supervise. Two of these districts are now covered by unqualified Staff, throwing greater responsibility on to me.

I should like to thank the Chairman and the Members of the Public Health Committee for their support, Dr. Dison, the Medical Officer of Health and the members of my Staff for their co-operation and loyal help.

I am,

Your obedient Servant,

J. HALL,

Chief Public Health Inspector.

COMPLAINTS

The complaints again have increased, indicating the gradual deterioration of good cottage property. It was hoped that by the introduction of the Housing Repairs and Rents Act, 1954, landlords would be encouraged to put the houses in a good state of repair, but judging by the response in Peterborough, this part of the Act did not achieve its purpose, as there were only two Certificates of Disrepair applications this year. During inspections, increases of rent because of the Act, were very rarely heard of.

It was necessary to serve 39 Statutory Notices as follows :—

Statutory Notices Served

HOUSING ACT, 1936

Section	*Number of Notices*	*Result*	*No.*
9	13	Work completed by Owner	3
		Work completed by Local Authority...	3
		Notices outstanding at end of year	7
10	1	Work completed by Owner	1
11	5	Houses closed	2
		Houses demolished	2
		Notices outstanding at end of year	1

PUBLIC HEALTH ACT, 1936

92	7	Work completed by Owner	4
		Notices outstanding at end of year ...	3
83	1	Work completed by Owner	1
45	2	Work completed by Owner	2
39	2	Work completed by Owner	1
		Notices outstanding at end of year ...	1
24	6	Work completed by Local Authority	5
		Notices outstanding at end of year ...	1
48	1	Work completed by Local Authority	1

PREVENTION OF DAMAGE BY PESTS ACT, 1949

4	1	Work completed by Local Authority	1

PUBLIC HEALTH ACT, 1936

The various sections of the Public Health Act, 1936 have been enforced during the year. I give below an abridged list of nuisances abated and defects remedied :—

Drains relaid, repaired, cleansed, etc.	221
W.C's and urinals repaired, renewed or reconstructed	51
Roofs repaired, rain-water pipes renewed, etc.	144
Chimney stacks rebuilt, etc., walls rebuilt and repaired	10
Woodwork repaired (floors, windows, doors, etc.) ...	39
Water laid on inside houses, new sinks fixed, waste pipes refitted, etc.	18
Accumulations of refuse and manure removed	12
Miscellaneous	149

Moveable Dwellings

The arrangements with the Town Planning Authority continue. Before a licence is granted for a moveable dwelling to be sited or used within the district, the interests of both authorities are protected by the insertion of conditions by the Planning Authority. The trend for the sites to enlarge and the dwellings to group together continues, making the provision of amenities such as electric lighting and the lighting of the Site easier and more practicable. During this year it was necessary on only one occasion to institute proceedings against the occupier of a moveable dwelling to ensure its removal. This dwelling is sited on the grass verge of a public highway and, not being occupied by a Hawker, Pedlar, etc., can only be dealt with under the Public Health Act, 1936. The effect is that the occupier pays a ground rent in fines to the Magistrates' Court and it appears will do so until such time as these fines grow large enough to make it an uneconomical proposition to remain on the grass verge.

At the end of the year 288 vans were on 44 sites—far too many in my opinion. I wonder what will happen to all these Moveable Dwellings when, as one presumes, sufficient permanent housing is available. Will they, as in the period following the 1914-1918 war, degenerate into insanitary slums?

Infectious Diseases

Terminal Disinfection. This is now carried out in cases of Tuberculosis only and this figure which dropped from 73 to 29 last year, remains at 29 this year.

Infestations

5 filthy premises cleansed.

Common Lodging Houses

The character of common lodging houses has completely changed. The lodgers now being composed almost entirely of single elderly men who would otherwise have to be housed in accommodation provided under the National Assistance Act, and a sprinkling of labourers engaged on road works. The old men are quite happy as they can look after themselves and live in the neighbourhood in which most of them have been brought up.

Offensive Trades

The only offensive trade carried on in Peterborough is that of Rag and Bone Merchant. Offal and Refuse from the Slaughterhouses is collected by a firm of Manure Makers, see report on Meat Inspection.

Knackers' Yard

None practising in the City.

Fairgrounds

Inspections were made of the Fairs during the year. All vans were provided with proper means of sanitation and water supply. The premises at which food was sold, or given away as prizes, received the Department's attention.

Provision of Sanitary Accommodation

All the premises which are licensed at the Brewster Sessions have been visited at regular intervals during the year; these include public houses, music halls, theatres, cinemas and miscellaneous places of entertainment.

FOOD AND DRUGS ACTS, 1938–55

It has been impossible to make a balanced number of inspections of the various premises registered or controlled by the Food and Drugs Acts and regulations made thereunder, because of extra work on Slum Clearance. In particular, cafes and restaurant kitchens have received attention, more care being taken over the kitchen part of the premises which is not normally seen by the public. The hotels are, for the greater part, situated in the centre of the City and are, therefore, under constant supervision.

The number of Shops selling food number 545 and the analysis is as below :—

BUTCHERS	63	Total 545 (none has been counted under more than one heading.)
SHOPS SELLING ICE-CREAM	197	
WET & FRIED FISH SHOPS	43	
CONFECTIONERS	39	
GREEN GROCERS	23	
GENERAL GROCERS	119	
CAFES	61	

In addition to the foregoing Shop premises there are 17 Bakehouses, of which 10 are situated at the rear of the Bakers' Shops; this is a large diminution in the numbers.

A large amount of redecoration, repairs, etc. have been carried out at these premises during the year.

Registered Premises Under Section 13/14

Except for occasional traders coming into the City area, all the Ice-cream sold is wrapped or in tubs.

(*a*) **Ice-cream.** Ice-cream is manufactured by two firms in the City. These manufacturers pasteurise their ice-cream by the " Holder " method.
The recording thermometers are regularly inspected and checked with the certified thermometers owned by the Department.

There are 197 premises retailing ice-cream in the City, to which 128 visits have been made.

(*b*) **Making-up Premises.** 65 visits were paid to 48 premises in the City (1 for the preparation of boiled crabs). This does not include visits paid to Making-up premises adjacent to Slaughterhouses for voluntary surrender of unsound food.

Foods other than Meat

146 requests were received during the year which resulted in 431 Condemnation Notes being issued, covering 2,413 tins of food and 1 Ton, 1 Qtr. $\frac{3}{4}$ lb. of other foodstuffs.

FOOD SAMPLING

An attempt has been made to vary the subjects for sampling, as will be seen from the list below :—

Nature of Sample	*Formal*	*Informal*	*Total*
Milk	36	2	38
Extract of Malt with Cod Liver Oil ...	—	1	1
Balm of Gilead Bough Mixture	—	1	1
Margarine	6	1	7
Halibut Liver Oil Capsules	—	1	1
Cod Liver Oil	—	8	8
Olive Oil	—	1	1
Almond Paste	1	—	1
Rice	—	1	1
Lard	—	1	1
Danish Blue Cheese	—	1	1
Cream Cheese	1	2	3
Milk Cheese	1	—	1
Potted Meat	1	—	1
Pickled Onions	—	1	1
Coffee & Chicory	—	1	1
Honey	—	1	1
Cream	1	—	1
Imitation Cream	1	—	1
Ice-cream	7	—	7
Butter	1	—	1
Brawn	1	—	1
Lemondae Powder	—	1	1
Desiccated Coconut	—	1	1
Pineapple Flavoured Curd	—	1	1
Mussels	—	1	1
Pork Sausages	6	—	6
Chocolate Cake Covering	—	1	1
Dressed Crab	—	1	1
Minced Turkey	—	1	1
Lemon Flavoured Jelly	—	1	1
Chopped Chicken	—	1	1
Maggi Seasoning	—	1	1
Cornish Cream	—	1	1
Tomato Ketchup	—	1	1
Golden Piccalilli	—	1	1
Kwick Set	—	1	1
Nervone	—	1	1
Red Plum Jam	1	—	1
Stoneless Plum Jam	1	—	1
Plum Jam	1	—	1

FOOD SAMPLING—*continued*

Nature of Sample	*Formal*	*Informal*	*Total*
Bread	—	1	1
Lollipops	—	1	1
Halibut Oil...	—	1	1
Supavite	—	1	1
Adexolin	—	1	1
Cod Liver Oil Compound	—	1	1
Coffee	—	1	1
Mincemeat	2	—	2
Marmalade...	—	1	1
Tea	—	1	1
Marshmallows	—	1	1
Non-Alcoholic Ginger Beverage... ...	—	1	1
Bronchial Mixture	—	1	1
Raspberry Preserve (Sugarless)	—	1	1
Juno-Junipah Tablets	—	1	1
Marzipan	—	1	1
Glace Cherries	—	1	1
Pork Brawn	2	—	2
Totals:	70	54	124

The average composition of the milks gives an increase of milk fat 3·7% as against 3·55% last year, and the Solids-not-Fat remain very nearly the same.

Margarine and Cod Liver Oil

Samples of margarine have been taken regularly for examination by the Public Analyst as to the amount of vitamin present. The large number of cod liver oil samples were taken also as a check on the presence of the advertised vitamins. In neither of these products was the vitamin content found to be below standard.

Soft Cheeses

Several samples of soft cheese were purchased during the year with varying results. It was found that whilst a small amount of cream cheese made from cream was being sold in the City, the majority was made from skimmed milk which is invoiced as "Cambridge Cheese." After public warning by the Chairman of the Public Health Committee, soft cheeses are now described under their proper designations.

Sausages

Of the six samples taken during the year, the average price was 2/9d. per lb. and the normal analysis showed a meat content of between 65% and 70%. Two of the samples were slightly below the necessary standard. This compares with the results obtained and reported last year on 19 samples taken since 1954.

Olive Oil

As a result of a sample taken of Olive Oil which contained rust, the particular batch was withdrawn for reprocessing.

Egg Albumin.

In two bakeries, Chinese egg albumin was found to be used in cake mixture and only one sample had pathogens isolated. The salmonella reported was " Sal. Thompson." This parcel was destroyed.

MILK (SPECIAL DESIGNATION) (PASTEURISED & STERILISED MILK) REGULATIONS, 1949

Processing Plants

There are three Pasteurising Plants for the treatment of milk in the City, two by high temperature, short time method, and the other by the " holder " method.

63 samples were taken and submitted to the Pathological Laboratory for approved tests, all of which were satisfactory.

Note :—For Tuberculin-Tested Milk, the test is Methylene Blue, for keeping quality, i.e., cleanliness; for Pasteurised Milk, the tests are Methylene Blue, for keeping quality, i.e., cleanliness, and Phosphatase to show whether or not the milk has been heat-treated; for Sterilised milk a Turbidity test is applied.

Bottling Plants

Sample bottles were taken from the washing machines and in four cases were found to be unsatisfactory. Adjustments were made to the machines which resulted in a correction.

SLAUGHTERHOUSES

All the 9 licensed Slaughterhouses are again in use. Four of these slaughterhouses are in practically continuous use and one is a Bacon Factory.

A Policy to regulate the provision of Slaughterhouses in England & Wales—1956

The policy of moderate construction of slaughterhouses has now given way to one, relying in the main, on providing slaughterhouses which will be required to be constructed or brought up to certain standards, which will be laid down in regulations to be published in due course. It is expected that Local Authorities will review the facilities and prepare reports for submission to the Minister for his approval or amendment, which will then become the Slaughterhouse Scheme for the area.

The local butchers have up to eighteen months after the coming into force of regulations still to be made, in which they can put forward schemes for the improvement of their own slaughtering facilities. In the meantime, you will recall that the Model Bye-laws have been adopted until such time as the regulations are issued.

MEAT INSPECTION

CARCASES INSPECTED AND CONDEMNED

	Cattle (excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	4,351	205	215	11,283	18,929
Number inspected	4,351	205	215	11,283	18,929
All diseases except T.B. and C.C. whole carcases condemned	3	7	12	16	20
Carcases of which some part or organ was condemned	721	11	5	133	509
Percentage of the number inspected affected with disease other than T.B. and C.C.	16·64%	8·78%	7·90%	1·32%	2·79%
T.B. ONLY Whole carcases condemned	11	4	—	—	2
Carcases of which some part or organ was condemned	370	10	—	—	145
Percentage of the number inspected affected with T.B.	8·75%	6·83%	—	—	·77%
CYSTICERCOSIS Carcases of which some part of organ was condemned	39	—	—	—	—
Carcases submitted to treatment by refrigeration	39	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

As will be seen on page 12, the total number of animals slaughtered during 1956 was : Beasts (including cows) 4,556; Calves 215; Sheep and Lambs 11,283; Pigs 18,929.

During this year, there was an increase in all animals killed, especially Sheep and Lambs, where the increase was nearly 3,000.

39 cases of Cysticercus Bovis were found.

It is our practice for all cases of Tuberculosis of the udder and T.B. in young calves, to be reported to the Ministry of Agriculture and Fisheries (Animal Health Division), or where a Veterinary Surgeon has given a certificate, he is notified of lesions found.

An attempt has been made to group causes of condemnations under headings listed in the Memorandum regarding the Methods and Criteria of Meat Inspection recommended by the Ministry of Food (now the Ministry of Agriculture, Fisheries and Food) for adoption by Local Authorities and their Officers.

BEEF *Stones*

For Tuberculosis.

11 Beasts	479
4 Cows	178
Beef (forequarters, hinds and part carcases)	164

For Cysticercosis.

39 Beasts	1800

(These carcases were submitted for treatment by refrigeration. The affected offal was sent for disposal by digestion to Mays & Sons, Ltd., of Bourne).

Other Causes.

1 Beast carcase	Leukaemia		29¼
1 Cow	,, Septicaemia		33
1 Beast	,, Actinobacillosis		35
2 Cows	,, Fevered		86½
1 Cow	,, Septic Peritonitis		37½
1 Beast	,, Septic Peritonitis		56
1 Cow	,, Emaciation		16½
Beef (bruised, heated and other causes)			80½
1 Cow carcase	Dropsy		40
1 Cow	,, Johnnes Disease and Emaciation ...		20

Offals (edible).

Heads and Tongues :	109 (T.B.); 50 (Actinobacillosis and Actinomycosis) 4 (Miscellaneous).
Lungs :	124 (T.B.), 65 (Pleurisy, etc.).
Livers :	60 (T.B.), 410 (Distoma), 6 (Cavernous-Angioma). 153 (Abscesses), 3 (Cirrhosis), 15 (Miscellaneous).

Other Edible Offals. 239 stones.

SHEEP

	Stones
For Tuberculosis	—
Other Causes.	
1 Sheep's carcase Oedema	3¼
3 ,, ,, Fevered	17¾
10 ,, ,, Dropsy and/or Emaciation	32
1 ,, ,, Septic Mastitis and Moribund ...	5
Mutton (bruised, etc.)	6½
1 Sheep's carcase Septicaemia	5¾

OFFALS

Livers. 20 (Parasites), 3 (Other causes).
Other Edible Offals. 23 stones.

PIGS

For Tuberculosis.	
2 Pigs' carcases	38
Pork	5¼
Other Causes.	
1 Pig's carcase Malignant Tumours	8
1 ,, ,, Erysipelas	6
2 ,, ,, Pathological emaciation	6½
3 ,, ,, Moribund	28½
4 ,, ,, Oedema	23¼
2 ,, ,, Uraemia and Dropsy	11¾
7 ,, ,, Septic and Pyaemic conditions	91½
Pork (Various causes)	40¾

OFFALS

Heads and Tongues : 139 (T.B.)
Various Offals : 89¾ Stones.

CALVES

For Tuberculosis	—
Other causes.	
2 Calves' carcases Dropsy	5¾
2 ,, ,, Pyaemia	4¾
8 ,, ,, Immaturity	19
Parts of carcases and various offals	2¼

Disposal of Condemned Meat and other Foods

All condemned meat is collected by Mays & Sons Limited, of Bourne, for disposal by digestion on their premises. All condemned meat and offal is immediately coloured green to ensure that it will not be sold for human consumption.

Other foods, when condemned, are collected and disposed of by burying in the Council's tip. Sometimes the food is poisoned for use as rat baits.

SLAUGHTER OF ANIMALS ACT, 1933-54

No horses are killed in the City and no horseflesh is retailed for human consumption.

FACTORIES ACT, 1937

Number of Factories on register—Mechanical	178
„ „ „ „ „ —Non-mechanical ...	30
„ „ Workplaces on register	40
	248
Number of inspections (exclusive of those for revision purposes)	124
Notices from H.M. Inspector of Factories :—	
Re (*a*) New Factories	Nil
(*b*) Deletions	Nil
(*c*) Change of Occupier	Nil
Letters sent to Factory Owners	12
Sanitary accommodation repaired or provided	11

Various nuisances and works of cleansing were carried out after informal action by this Department, in addition to the above.

50 visits have been paid to 46 building sites re: sanitary accommodation.

OUTWORKERS

Addresses of Outworkers :

Received from Employers ...	159
Received from other Councils	Nil
Forwarded to other Councils	4

All the Outworkers' premises in the City have been visited, and found to be satisfactory.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

	Type of Property				
	Local Authority	Dwelling Houses (Incl. Council Houses)	Agri-cultural	All other (including Business & Industrial)	Total
1. Total number of properties in Local Authority's District	29	17,793	90	1,695	19,607
2. Number of properties inspected by the Local Authority during 1956 as a result of :—					
(*a*) Notification	8	222	2	74	306
(*b*) Survey under the Act	16	478	25	107	626
(*c*) Otherwise, e.g. Visited for other purpose primarily	9	525	30	2,128	2,692
3. Number of properties (under 2) found to be infested by rats — Major	2	4	—	2	8
3. Number of properties (under 2) found to be infested by rats — Minor	11	101	22	30	144
Mice — Major	—	—	—	2	2
Mice — Minor	1	18	—	19	38
4. Number of infested properties (under 3) treated by the Local Authority	14	123	22	53	212
5. Total treatments carried out including re-treatments	75	131	22	58	286

PREVENTION OF DAMAGE BY PESTS ACT, 1949—Cont.

	Type of Property				
	Local Authority	Dwelling Houses (Incl. Council Houses)	Agri-cultural	All other (including Business & Industrial)	Total
6. Number of Notices served under Section 4 :—					
(1) Treatment	—	1	—	—	1
(2) Structural Works (i.e. Proofing)	—	—	—	—	—
7. Number of cases in which default action was taken by Local Authority following issue of Notice under Section 4	—	—	—	—	—
8. Legal Proceedings	—	—	—	—	—

9. Number of ' block ' control schemes carried out ... ... Nil.

All Farmers in the City area were reminded by circular, of the provisions of the Prevention of Damage by Pests (Threshing and Dismantling of Ricks) Regulations, 1950, during the latter part of October. Under these regulations before a rick is dismantled, it must be surrounded by a wire netting fence to a height of 30 inches to prevent the escape of rats.

III.

PROGRESS–1873-1956

A brief review of

Public Health in Peterborough

CITY OF PETERBOROUGH

MEDICAL OFFICERS OF HEALTH

Dr. W. Thomson	1873–1881
Dr. W. E. Paley	1881–1895
Dr. R. W. Jolly	1895–1916
Dr. J. N. Collins (Acting)	1916–1920
Dr. W. Johnstone	1920–Aug. 1949
Dr. D. G. Crawshaw	Jan. 1950–Nov. 1951
Dr. W. D. Swinney	Mar. 1952–July 1955
Dr. G. Dison	Sept. 1955–

FOREWORD

In compiling this history of Public Health in Peterborough I have, perforce, been brief and, therefore, only high-lighted some of the events in the 83 years.

My thanks are due to Mrs. K. M. Savage, who so willingly undertook the laborious task of going through old records and did all the typing; to Mr. G. J. Norris of the Town Clerk's Department for his assistance in finding the records; to Mr. J. L. Seden for making available the early annual reports; to Mr. Wainwright, the Editor of the *Peterborough Citizen and Advertiser*, for facilities for research through the early copies of that paper.

G. DISON.

PROGRESS—1873-1956

The first reference to a Medical Officer of Health that can be traced in available records, was found in the Minutes of the Improvement Commissioners, dated 7th November, 1872, when the Clerk read a letter from the Local Government Board, dated the 31st October, 1872, requesting a list of " the names of the Chairman, members and officers of this Board as the Urban Sanitary Authority,"

The Clerk was instructed to reply accordingly, giving the names of members and officers, excepting the Officer of Health, and " with respect to him, that his appointment is not yet made."

On the 5th December, 1872, the Chairman drew attention to the appointment of a Medical Officer of Health, either by the Board of Commissioners for Peterborough alone, or in conjunction with adjoining Rural and other Authorities, and a Sub-Committee was appointed to confer with other Authorities. It was proposed that, in order that the management of the affairs of the town may be retained in their own hands, the members of the Improvement Commissioners should appoint their own Medical Officer of Health. An amendment to this was, that the Sub-Committee should meet and explore the situation with other authorities before making the decision, the amendment being carried.

On Friday, 24th January, 1873, it was decided by 11 votes to 2 that the Improvement Commissioners appoint their own Medical Officer of Health and also that they appoint their own Inspector of Nuisances. There was a difference of opinion as to the salary which should be paid, this ranging from £100 a year to £20 a year. Eventually, the salary was fixed at £50, and the Clerk was instructed to advertise once for a Medical Officer of Health for one year. It was also decided not to apply for payment of any portion of a salary " out of the monies voted by Parliament " and, subsequently, on the 1st February, 1873, the Clerk wrote the following letter to the Secretary of the Local Government Board :—

Peterborough,
1st February, 1873.

Sir,

The Urban Sanitary Authority for this City will proceed to the appointment of their own Medical Officer of Health on Thursday, the 6th day of February instant, for one year, as I have informed Major P. Cox, but it is not intended to apply for payment of any portion of his salary out of monies voted by Parliament.

Having reference to the " Regulations " of the 11th day of November, 1872, I am directed to ask whether such officer, paid wholly from the funds of the Urban Sanitary Authority will be required to discharge the several duties and make the Annual and Quarterly Reports and Returns mentioned in the 14th and 15th Sections of the " Regulations " or any, and what Reports or Returns to the Local Government Board or not.

NELSON WILKINSON,
Clerk.

At a meeting on the 6th February, 1873, two applications for the post of Medical Officer of Health were considered and when the voting took place " 8 hands were held up for each." The Chairman gave his casting vote for Dr. W. Thomson, and it is interesting to note that on that day the Clerk wrote to Dr. Thomson, informing him that he had been appointed Medical Officer of Health and drawing his attention to the existence of smallpox now prevalent in the City, within the limits of his Authority.

On the 8th February the Clerk wrote to the Secretary of the Local Government Board regarding Dr. Thomson's appointment and the following is an extract of his letter :—

" In his application for the appointment, he sent in his qualification as under : ' Copy of Register,' Thomson, William, Priestgate, Peterborough, Bachelor of Medicine and Surgeon of Glasgow University, 1866. Licentiate of the Society of Apothecaries of London, 1868, M.D., Glasgow, 1869. Two gentlemen of the Urban Sanitary Authority are Magistrates and Physicians and are satisfied with Dr. Thomson's qualification. I only name this to save trouble to your Board in inspecting Dr. Thomson's Diplomas, &c., which otherwise shall be furnished. If this letter is satisfactory, I shall be glad to have his appointment confirmed by your Board. As regards ' the Inspector of Nuisances,' his appointment under Section 9 of ' the Town's Improvement Clauses Act, 1847,' did not require confirmation and so I conceive it is not required under ' the Public Health Act, 1872 '."

On the 14th February, 1874, Dr. Thomson presented his first Annual Report of the sanitary conditions of Peterborough. This was fully reported in the *Peterborough Advertiser*, as follows :—

" In submitting to you the first annual report of the sanitary condition of Peterborough, I labour under the disadvantage of not having previous data for comparison. However, when I look at other towns not far off, I have pleasure in being able to congratulate you on the health of the community and the absence of any serious epidemic during the past year. I think this is the best time to inform you how I have endeavoured to fulfil the instructions given Medical Officers of Health. I have alone, and with the Inspector, visited three places or premises as shown in the report book. I have had 63 applications, as noticed in the book for that purpose, besides numerous applications not affecting health. I have, periodically, sent out circulars to the clergymen, medical men and others, requesting to be informed of the presence of any infectious disease or local cause of illness of which they might be aware.

' I am indebted to the medical men for assistance in my endeavours to detect preventable disease on its first appearance. I can name diseases of the gravest kind which, thanks to scientific medicine, do not now exist. The Plague, at all events, with very slight exceptions, is, in Europe, a matter of history. Smallpox has no right or title to existence and shows itself only because some people are foolish or ignorant. I have monthly reported to you on the health of the town, with special reports on wells, the square pond estate, smallpox, the systematic emptying of ashpits and closets, the means to be provided by the Sanitary Authority when requested; also, that I believe the present system of drains opening into the river in the town likely to be injurious to the health of the inhabitants, and advise

that there be one main sewer (instead of five, as at present), which would run parallel with the river and empty its contents into the Nene below the town, and below high water level; also, that at some distance from the mouth of this main drain, there be constructed a tank for precipitating and purifying the sewerage by chemical agent. I have weekly received a return of deaths within the district, and can state that the rate of mortality in Peterborough will bear favourable comparison with any town in England. There were 208 deaths during the past year; take the population at 11,090, that gives the average death rate at 18·9 per thousand for 12 months. The largest number of deaths, 27, occurred in February last; the lowest number, 7, occurred in June. The months varied as follows—February 27, March 25, April 15, May 10, June 7, July 17, August 14, September 20, October 19, November 23, December 16, January 16. The preventable diseases number 28, viz.: Febricula one, smallpox three (two of these did not show signs of vaccination), measles four, whooping cough one, chicken pox one, diphtheria one, typhoid fever three, diarrhoea thirteen (of these only one was over twelve months old), scarlet fever one, these contrast very favourably with the condition of Lincoln at present; there, the number of deaths during the past quarter, 225, gives a death rate of 32 per thousand. Of these, 50 were from scarlet fever, owing to the want of the proper means of isolating and checking the disease at first; the spread of smallpox, measles, and especially scarlet fever is due to infection from person-to-person, either directly or indirectly, by means of clothing, bedding and other articles with which the patient has come into contact, and the means by which they may be stayed are, essentially, the isolation of the sick and the organisation of a proper system of disinfection. In conclusion, I beg to remind you that in all places where there is no accommodation for those persons who, though above the pauper class, have in their own homes no means for isolating patients suffering from infectious diseases, it is the duty of the Sanitary Authority to provide it, and although the adoption of such measures must, of necessity, be accompanied by a disbursement of public money, yet experience has shown that there is no truer economy than a judicious outlay in the cause of health."

Peterborough received a Charter of Incorporation in May, 1874, and at the first Quarterly Meeting of the Council, held at the Town Hall, on Monday, 15th June, 1874, it was proposed, seconded and carried unanimously :

" That William Thomson, M.D., Peterborough, be appointed Medical Officer of Health until the 9th November, 1874."

At the same time it was proposed, seconded and carried *nem con* :

" That William Key, the now Surveyor under the Improvement Commissioners, be appointed Surveyor and Inspector of Nuisances, subject to one month's notice."

Dr. Thomson was greatly concerned about the presence of typhoid fever and the state of the water and drainage of the City and on the 20th August he wrote as follows to the Town Clerk :

" Typhoid fever is endemic at New England at present. Several cases have proved fatal. Yesterday I visited thirty cases of this disease there. Under the circumstances, I consider immediate steps should be taken to remove the causes—impure water and imperfect drainage. The Sanitary Committee

should at once take the subject into consideration. I have seen the Great Northern Engineers and had disinfectants supplied, but further measures are requisite."

The Council unanimously decided, "That the Clerk take immediate steps to compel the Great Northern Railway Company to provide a plentiful supply of good water, suitable privy accommodation and necessary drainage for the occupants of dwellinghouses at New England, belonging to the Company, and take such other steps as may be necessary."

On September 21st, 1874, Dr. Thomson reported to the Council regarding water from Pipe Lane pump, stating that he had no hesitation in saying that the water was unfit for cooking purposes, though not so highly impregnated as some of the public pumps, and then gave results of the analysis of water from the Long Causeway pump near the Market Place. He compared these results with water from the London Water Company and stated that the water from the Peterborough pump was " very bad indeed, and I take the present opportunity of respectfully advising the Council of the very impure condition of the water generally in Peterborough. I am not aware of any subject which more universally affects the community than the want of a reliable water supply; not only are their lives endangered, but the increasing prosperity of the Borough is retarded by keeping away that class of householder who would be useful to the trade of the City."

Immediately, action was taken by the Council to inform the feoffees and request that they concur with the Corporation in an immediate examination of the pumps and wells and of any drains that may communicate therewith, in order that the defects may be remedied.

It would appear that the Council were quite pleased with Dr. Thomson's work, for at the Adjourned Quarterly Meeting of the Council, on the 5th October, 1874, it was proposed that the salary of the Medical Officer of Health be increased to £75 per year. This, incidentally, was carried by 10 votes to 4.

The First Annual Report of the Medical Officer of Health to the Council, following the Charter of Incorporation, was presented in February, 1875. Mention of this Report was made in the local newspapers, but no detailed report of this could be found. In August, 1875, there was a complaint received that the stench from the factory of Mr. W. Vergette, was insupportable to the members of the postal staff. This complaint was referred to the Medical Officer of Health, who reported to the Council that the business of candle-making was carried on in a very clean and correct manner and that, although the smell might be unpleasant to some, he did not consider it injurious to health. Also, in the same year, there was a complaint regarding smoke nuisance in the City and this was fully investigated by the Medical Officer of Health, who reported on his findings to the Town Clerk, who in turn, reported on the alleged smoke nuisance to the Council, giving the legal aspect and outlining how action might be taken. However, it was reported at a subsequent meeting that the nuisance had now ceased, as the use of the lime kiln in question had been discontinued.

The Annual Report for the year 1875 was presented to the Council on the 18th January, 1876. (Medical Officers of today could well do with following the early example in having their Annual Reports ready so early in the year).

In this report Dr. Thomson commented on the increase in the population of the City. In 1841 there were 6,959 souls, whereas in 1875 the population was reckoned to be 18,000, and gave the chief cause for the increase in population as the extension of railway traffic and buildings. He further commented, that the supply of houses was in so much demand that " many people are obliged to occupy them before they are finished, or in a fit state for habitation; this is a frequent cause of mortality, especially with the young and feeble." He further said, that there was a striking example of the benefit of pure air and water for the maintenance of health in that portion of the Borough called New England, for, following the introduction of a wholesome water supply, there had not been one case of typhoid fever in that area, whereas in the year before there had been ten. Never since the building and occupation of that hamlet had the people been so free from illness. He then went on to harangue those who built houses for the middle classes, saying that he had " lately seen some of the most flagrant carelessness or ignorance of sanitary architecture and improvement. I have found houses without any drains, and cesspools under the windows. In some, the water tank supplying the house, fed the closet and communicated with it directly, thus contaminating the whole water supply . . . . I cannot speak too highly of the great boon your proposed water supply and system of drainage will be to a town like this, with so many new buildings being constructed."

It is interesting to read that thrush accounted for three of the 400 deaths, enteritis 11, marasmus and debility 11, alcoholic saturation 2, and accidents 15. The death rate was 22·2 per thousand, whereas in the previous year, with 349 deaths, the death rate was 19·38. There were 23 deaths due to prematurity, and Dr. Thomson stated that this was a " too common cause of death in Peterborough."

In March, 1887, Dr. Thomson reported that smallpox had broken out in New England and on the measures taken to prevent the spread of this disease. It was resolved that the Great Northern Railway Company be informed of the outbreak of smallpox and of the complaint of the Council of the offensive state of the Company's filter beds and Wakerley Willow Drain, and that they be requested to give immediate orders for the cleansing of the filter beds and drain, and the removal of any matter likely to propogate the disease. Thanks to the prompt action taken at that time the Medical Officer of Health was able to report some 4 weeks later, that no further case of smallpox had occurred at New England and he now considered that no further precautions by the Council were necessary.

It was in June, 1878, that the Council first considered the erecting of a permanent building for the reception and isolation of patients suffering from infectious diseases, but it was some considerable time before the Isolation Hospital was, in fact, built.

In September, 1878, the Medical Officer of Health reported that he was attending a patient and that he believed his illness was due " to the noxious smells of the neighbourhood." He also reported that smallpox was again present in the City and the Council considered the question of erecting a temporary hospital for the isolation of smallpox patients.

On the 31st May, 1881, a communication was read to the Council from Dr. William Sinclair Thomson, stating that in consequence of his leaving Peterborough, he desired to give notice of his intention to resign his post. It

was resolved that the thanks of the Council be given to Dr. Thomson for the ability and energy displayed by him in the discharge of his duties as Medical Officer of Health in the City since the time of its incorporation.

On the 28th June, 1881, the Council again met to appoint a new Medical Officer of Health. There were two applicants for the post, and William Edmund Paley of Thorpe Road, Peterborough, was appointed by 19 votes to 3. Dr. Paley's term of office seemed to be concerned mainly with the building of a smallpox hospital. In November, 1884, a communication was read from Dr. Paley, stating that through an unfortunate accident he would be unable to attend to the whole of the duties of the office for a short time, and asking the assent of the Council to an arrangement he had made that Dr. Paley, Sr., or in his absence, Dr. Kirkwood, should act for him. This was agreed to with " hearty assent " and a communication was sent to Dr. Paley expressing the regret of the Council at the accident.

Very little reference in the Council Minutes could be found during the next few years, but in December, 1889, it was decided that the Infectious Diseases (Notification) Act, 1889, be adopted, in the Sanitary District of the City and Borough of Peterborough, to come into force at such time not less than one month after the first publication of the resolution when passed " as the Authority may fix." And in December, 1890, it was unanimously resolved to adopt the Infectious Diseases (Prevention) Act, 1890.

It would appear that there was some rivalry as regards health matters between Peterborough and Stamford, for, in 1894, the Town Clerk of Peterborough wrote a letter to the Town Clerk of Stamford, a copy of which was sent to the Editor of *The Stamford Mercury*, asking him to publish the text of this letter in his paper. The letter to the Town Clerk of Stamford was as follows :—

" Dear Sir,

My Council, at a meeting held last evening, had their attention called to a report in *The Stamford Mercury* of the 20th instant, of a speech made by Mr. Cade at your Council Meeting, in which occur these words : 'At Peterborough, after enormous expense in a deep drainage scheme, there was a filthy state of things, manholes were placed all over Peterborough, and the town was in a very unhealthy state,' and was directed to write to you and contradict the statement. There is no truth in the assertion; on the contrary, our town was never in a more healthy state than it is at the present time, and our death-rate for years past has been very low. It was the subject of congratulation at a meeting held only last week, that Peterborough was almost the only town in which no infectious disease had occurred during the previous fortnight, except one of erysipelas; and I shall feel obliged if you will inform your Committee that the allegation of Mr. Cade is denied.

I propose sending a copy of this letter to the editor of *The Stamford Mercury.*

Yours faithfully,
W. MELLOWS,
Town Clerk.

J. E. Atter, Esq.,
Town Clerk,
Stamford."

At the Quarterly Meeting of the Council on the 30th July, 1895, the Mayor referred to the death which had taken place that morning, of Dr. Paley, the Medical Officer of Health, and arrangements were made to fill the vacancy. On the 24th September, 1895, the Council considered four applications for the vacancy and on a second ballot Mr. R. W. Jolly was given 9 votes and the runner-up 6. The Mayor thus moved the following resolution from the chair, which was unanimously carried :—

" That Mr. R. W. Jolly of Bridge Street, Peterborough, be appointed Medical Officer of Health for the City and Borough for a period of one year at a salary of £75 per annum."

For some years the only matter of public health interest that could be found in the Council Minutes, related to the building of the proposed Isolation Hospital. There is, in existence, the Medical Officer's Annual Report for 1896, and in this report Dr. Jolly reported that the death rate for the year was 12.45 and the General Birth Rate was 25·38, and one ought to say that, " although the Death Rate was the lowest recorded for many years, there was no means of obtaining a return of persons belonging to the district who died away and, therefore, it followed that the calculation of the death rate was a trifle too Utopian." However, the average death rate for the 33 large towns in England for the period 1892-1896 was 20, and Dr. Jolly commented that " Peterborough can fairly hold her own with any other provincial town in England."

On the question of scarlet fever, the report goes on to say that an epidemic had been raging with more-or-less severity since February of that year. It commenced in the South Ward of the City, having originally been imported from the Rural District of Woodstone. When it reached New Fletton, so many children were affected that Dr. Jolly advised the day-schools should be closed and they were not opened again for two months. This extreme measure was attended with complete success, for no further cases occurred there.

There was a slight increase in the number of cases of diphtheria and Dr. Jolly reported, " a thorough investigation of the sanitary surroundings had been made; in each case, and as a general rule, defects were discovered in the shape of defective or faulty drains." He goes on to say, " What connection there is between sewer gas and diphtheria remains, at present, a mystery, but I am perfectly convinced that there is something more than mere accidental coincidence."

Dr. Jolly must have been an optimist, for he goes on to report that filthy dwellings still came under his observation, but " the dwellers in these homes (?) are rapidly becoming converted to the belief in the efficacy of soap and water." (Today, many dwellers in similar homes are not yet converted to this belief.)

From the year 1898 there is an almost complete set of Annual Reports and these will be briefly reviewed, in order to complete the picture to the present day.

The Infant Mortality Rate for the year 1898 was 153·94 per thousand, but this compared favourably with that for England and Wales, which was 161. As regards Scarlet Fever, it was reported that the epidemic had been raging for nearly three years, but Dr. Jolly put this down to the fact that the disease was mild in character and this rendered parents careless, in that no attempt was made to segregate children " who are peeling." They were allowed to visit other families and thus, the fever continued to spread.

It appears that, in that year, there was an outbreak of Infantile Diarrhoea which accounted for 54 deaths. Dr. Jolly goes on to say, that the whole matter was so thoroughly discussed when a special report was presented, that he did not think any useful purpose could be served by re-opening the subject about which such diverging opinions were, at the time, expressed. There is, unfortunately, no copy of this special report available. He then goes on to say that the recommendations made by Mr. Walshaw, the Sanitary Inspector, and himself were gradually being implemented, and he hoped before another summer, all cause of complaint from the manholes would be removed. Further, in the drainage system of a town, an ample water supply was greatly to be desired, for not only did the water act mechanically, but by diluting the contents of the sewers, it rendered the sewage less concentrated and, therefore, less liable to give off offensive gases.

He then went on to talk about the milk supply of the City, pointing out that the recent discoveries with regard to the causation of Tubercle, had clearly demonstrated the importance of registration, combined with effective supervision of all dairies, shops, etc., where milk was sold. Many towns have already taken up the subject most energetically and " Peterborough certainly should not be behind the times when the loss of its inhabitants is concerned."

Dr. Jolly suggested that a separate Sanitary Committee be formed and said that, seeing what a vital position the health of the community occupied in regard to the general welfare and prosperity of the town, it was somewhat of an anomaly that no such body existed. It was not until 1909 that Dr. Jolly's suggestion bore fruit and in that Report, under the heading of Public Health Committee, he says " I am glad to report that this Committee has at last been formed, consisting of 11 members of the Council, and I quite anticipate that it will be the means of increased interest being taken in questions appertaining to the health of all classes of the community."

In 1901 Dr. Jolly was able to report that the result of the census held in that year, showed that the population of Peterborough was 30,870, which showed an annual increase for the last 10 years of 569. In that year, Dr. Jolly considered the house accommodation of the town was extremely good, the majority of the dwellings, especially for the working class, were of recent construction and " replete with every comfort." In the older part of the town some rows of back-to-back cottages still existed, but every care was taken to make them as sanitary as possible. Every house in the town was connected with the public sewers and these sewers were kept well flushed by 19 automatic flushing tanks. All house refuse was removed by the public authority. There was a weekly collection in open carts, but instructions had been given, arranging for covers to be fitted to the carts. Dr. Jolly went on to say, " I cannot help thinking a bi-weekly collection would be more desirable. 7 days is a long time to remain in near proximity to dwellinghouses, more especially during the summer months." (This advice seems to have fallen on stony ground).

On the question of cancer, Dr. Jolly wrote as follows in 1902 :—

" The increase of cancer is becoming a question of national importance, and it does seem passing strange that Parliament has not voted one single penny to the Cancer Research Fund in the cause of suffering humanity. One is forcibly reminded of the old lines :—

Their lofty souls have telescopic eyes,
Which view afar the faintest speck of distant pain,
Whilst at their feet a world of agony
Unseen, unheard, unheeded, writhe in vain."

In the year, there were 33 deaths due to cancer.

On the question of house refuse, Dr. Jolly was able to report that the collecting carts were all now covered by tarpaulins, but he went on to say that some Bye-laws were also necessary to prevent the removal of all kinds of manure after a certain hour in the morning. One afternoon he saw a pathway simply covered by foul-smelling pig manure in the course of removal.

Under the heading of " Nuisances," the following appeared :—

" Dense volumes of black smoke are emitted from several chimneys in the town; in this respect I think the Corporation are themselves the greatest offenders, as residents in the immediate vicinity of the Electric Supply Station can testify from practical experience."

The Death Rate due to alcoholism, seems to have gone up, for 12 persons died as a result of alcoholism, which was almost double the number for the previous year.

Also, in 1902, one woman was sentenced to three months' imprisonment for neglecting her children. Dr. Jolly hoped that this conviction would have a salutary effect for the future, and serve as a warning to careless and negligent parents. (Down through the years more persons were convicted, and yet cruelty to children still continued. It would appear that this legal measure had had little effect. One can only hope that health education will have a greater effect in the future).

A lesson in co-operation can be learned from the 1903 Annual Report, for in this, Dr. Jolly reports that despite the epidemic of smallpox raging over the country, only one case occurred in Peterborough, in the person of a professional cricketer, who had just arrived from Fleckney, near Leicester. This man lodged at a Public House in Brook Street and had played in a cricket match on the town ground against a team from Stamford. The sufferer was removed to the Smallpox Hospital, the Public House closed, as well as the cricket pavilion. Contacts in the City were advised to be re-vaccinated at once and notices forwarded to the Medical Officers of Health concerning members of the Stamford team. In this way, re-vaccination was secured in nearly every case. That same evening Dr. Jolly attended a meeting of the Cricket Club and arranged that all matches arranged either out, or at home, should be abandoned for 14 days; and went on to report that the Committee of the town club had co-operated in a loyal manner and carried out his recommendations in every detail.

In the same year, four tramps who came from a lodging house at Kettering, where smallpox had broken out, and whose description was wired, were at once identified and detained in quarantine for 16 days. However, one man who came from Lincoln under similar circumstances, hearing that he was wanted, left hurriedly by train for Norwich. His departure was, however, telegraphed to the Medical Officer of Health of that City and he was met on arrival by the Sanitary Authorities.

In May of the same year an urgent notice was received by Dr. Jolly, from the Medical Officer of Health of the City of London, reporting that 296 old army blankets from South Africa had been delivered to 5 different local firms. He further added that blankets from the same lot had been found to be infected with Typhoid Bacillus. Enquiries were at once made and all unsold blankets secured and burnt by order of the Corporation. The addresses of purchasers to whom small parcels had been despatched were forwarded to 15 different Medical Officers of Health. In this way only 10 blankets ultimately remained unaccounted for; they having been sold for cash over the counter and could not be traced.

In 1904, the following comment appears under House Accommodation :

" Some of the new residences for the wage-earning classes are excellent; one innovation being a bathroom, the health-giving properties of the early morning tub, are not sufficiently understood to be appreciated."

In 1907 the Infant Mortality Rate of Peterborough was 85·39 per 1,000 births registered. This was the first time that this rate had been below 100. The figure for the previous year (1906) was 107. Also in this year, Dr. Jolly reports that there was not a single case of enteric fever notified, thus constituting a record and " afforded very striking evidence of the good sanitary conditions of the City."

On the question of sanitary conditions, the following appears :—

" One objectionable practice to which I wish to draw your attention, is the habit hawkers of meat, fish, vegetables and other comestibles have, of throwing parts not required, such as entrails, etc., on the road, reminding one of Eastern cities. In summer-time, one's olfactory nerves are often offended by anything but pleasant odours emanating from putrefying animal or vegetable matter lying about the streets."

In 1908, Dr. Jolly reports that he had been appointed Medical Inspector of school children at a tentative salary of £75 for 12 months. He further reported that, as far as his medical examination of school children had gone, they appeared a very healthy lot; the principal defect being nits or even vermin in the hair, and went on to report in one case the vermin had actually eaten into the scalp. The parents were summoned for cruelty by the National Society for Prevention of Cruelty to Children, and fined £2. He further commented that the services of a tactful school nurse were much required to visit the homes and assist mothers by kindly advice.

There were 34 slaughterhouses in the City and these were all inspected every 2 months and kept in good order. Dr. Jolly further reported as follows :—

" I found the carcase of a bullock skinned and ready dressed, hanging up in one licensed slaughterhouse, it was extremely emaciated, and on one side, the inner lining of the chest walls had been stripped, knee joint and fetlock joint on the same side also diseased. The lungs had been hidden away in an outhouse, but on production, after considerable persuasion, they proved to be extensively diseased and full of cavities containing matter; there was also a huge mass of enlarged glands, at the root of the lungs. The animal had been suffering from general tuberculosis. The entire carcase was seized, condemned by a magistrate, and ordered to be

destroyed, as unfit for the food of man. Legal proceedings against the holder of the licence were authorised by the Corporation; he was convicted, and fined £20, together with £10 10s. costs; the renewal of the offender's licence being also refused by the Corporation at the beginning of this year."

On the question of factories and workshops there was a considerable increase in the pea sorting industry during 1909, the peas being received at 72 houses which were all carefully inspected, and 10 were found unsuitable, owing to their dirty condition. Dr. Jolly goes on to say, " I am not sure that this industry is altogether an unmixed blessing. Wages are small, hours long, houses littered up, and children often kept away from school to assist; I have myself, seen them sitting up at night sorting peas when they ought to have been in bed, straining their eyes by the dim light of a spluttering oil lamp, or the doubtful illumination afforded by a tallow candle. This seems to be opposed to the spirit of the Factory Act."

In 1910 the Council appointed the first fully qualified Sanitary Inspector, but he did not take up his duties until 1911. It is through the courtesy of this gentleman, Mr. J. L. Seden, that the early reports of the Medical Officer of Health are available.

It is interesting to note that in 1910, 60 samples of food were taken and submitted to the Public Analyst for analysis. Of these, three were of whisky and, as there is no record of legal proceedings having been taken, it is to be assumed that the whisky passed the test. The death rate in 1910, of 9·77, was the lowest on record.

In 1911, following a new system inaugurated by the Registrar General, whereby the notification of the decease of every resident away from home was forwarded to all Medical Officers of Health for their acceptance, caused the death rate in this year, to rise considerably to 12·77. 1911 seemed to be a scarlet fever year, for there were 219 notifications with 4 deaths. The epidemic began to abate about June, but burst out with renewed activity in October. About the same time a " cinematograph exhibition " was opened at New England, to which children were admitted for a penny, in large numbers. Although no defects as regards ventilation could be discovered on inspecting the buildings, Dr. Jolly mentions that, as similar experiences had been reported from other towns, one could only assume that the coincidence was not altogether accidental and that the aggregation of children, closely packed together, is neither desirable, nor free from danger as regards the spread of infection.

The first mention of acute poliomyelitis was found in the Annual Report of 1912, when there were 2 notifications, one patient dying. In both instances the disease was contracted away, one at the seaside, the other at a provincial town, but the fullest enquiries failed to discover any definite cause.

Commenting on house refuse, the difficulty of finding a suitable place for tipping was stressed. This difficulty " will soon necessitate the erection of a destructor, a much more up-to-date method of disposing of rubbish," comments Dr. Jolly.

Like Medical Officers of today, Dr. Jolly expressed concern about the divided responsibilities with regard to tuberculosis. He writes as follows :—

" I think it is absolutely necessary that the control of persons suffering from tuberculosis should be placed under one authority, instead of at least three different bodies having a finger in the pie. It would be much better for the patients themselves, and for the welfare of the general public. Relations are all getting rather tired of so many officials calling to make the same enquiries, and they become decidedly reticent and suspicious when a note-book is produced. After an interview with one good lady, I began to wonder whether there was any vestige of my character left."

In 1914, Dr. Jolly reported that the City had now been entirely free from an outbreak of smallpox for 10 years and that the number of exemption certificates from vaccination granted during 1914 was 410, which meant that 60% of the children born during that year would grow up entirely unprotected from smallpox and would be a source of danger to themselves and also to the surrounding population.

In November, 1914, several units of territorial troops were drafted into the City and billeted on the inhabitants. There seemed to be very good co-operation between the A.D.M.S. and Dr. Jolly, for lists were drawn up in advance, pointing out unsuitable localities and houses, and notification to such effect was at once sent to the A.D.M.S. The billets were inspected by Dr. Jolly, or the Sanitary Officers, and the health of the troops seemed to be extremely good.

Dr Jolly reports that in November of that year a qualified school nurse was appointed, who would also act as health visitor when required. The Notification of Births Act was eventually adopted in the City in 1915 and the school nurse, acting also as health visitor, visited cases selected by Dr. Jolly.

Dr. Jolly died in August, 1916, and Dr. J. N. Collins, who already had numerous other commitments, was appointed Acting Medical Officer of Health, and continued in office until the beginning of 1920, rather against his wishes, as he felt that he could not devote sufficient time to the work.

In his report for the year 1918, Dr. Collins mentions that there were 2 outbreaks of influenza, a comparatively small one in July and a larger one in November and December. The former outbreak resulted in 10 deaths and the latter in 78. It is interesting to note that exactly half the deaths were in persons between the ages of 15 and 35.

The council experienced some difficulty in securing a Health Visitor. Early in 1918, in response to advertisements, some apparently suitable applications were received, but as there was slight delay in dealing with them, the applicants, when asked to attend, indicated that they had secured other appointments. A second attempt resulted in a candidate interviewing the Committee to disclose that she did not possess suitable qualifications, and a third attempt brought only one application, which was couched in such terms as to prove conclusively that she was unfit for any responsible post.

In his report of 1919, Dr. John Collins indicated that he would serve no longer than till May of the following year. In this report he strongly urged the Corporation to establish a public abattoir, so as to do away with the " unsatisfactory small slaughterhouses which are not quite condemnable, scattered all over the City," and he also drew attention to the question of refuse disposal by destruction which, he maintained, would effectively prevent the constant difficulty of disposal in other ways.

Dr. William Johnstone, M.D., D.P.H., was appointed Medical Officer of Health in May, 1920, and he reports that the outstanding event of the year was the formation of the Maternity and Child Welfare Committee, consisting of the Health Committee with co-opted members and formed under the provisions of the Maternity and Child Welfare Act, 1918. In that year the acreage of the City was 1,878, and the population was 34,752. He was extremely concerned about the number of deaths due to malignant diseases which, that year, numbered 51, and made a strong plea for increased research and gave some good advice to the general public in connection with these diseases.

In 1921 a Public Health Laboratory was commenced in the City Health Office and a circular letter sent to medical practitioners as to the facilities of the work pertaining to a municipal borough.

A full-time lady health visitor was appointed in December, 1920, and took up her duties in the beginning of 1921. There were 4 infant welfare centres in this year, situated at Queen Street, Eastgate, New England, and South Ward, the latter being a new centre.

In 1922 there was some mild influenza in the City, and Dr. Johnstone had a notice published and circulated and it is interesting to note from the copy below, that much of what he recommended in those days still pertains today :—

Prevention of Influenza

"There is some mild ' flu ' about.

Prevention rests with those who are ' off colour ' with a cold, feverish or otherwise, not mingling with other people, and remaining at home or in bed, until out of the infective stage, under the Doctor's orders. Those who are well should avoid, as far as possible, crowded meetings and assemblies of all kinds, and to avoid unnecessarily visiting houses where cases are known to exist, or on being informed that any of the inmates are down with it.

It is the duty of everyone to keep ' fit ' both for their own sake and to resist, and assist others to resist, the infection.

Therefore, don't sneeze or cough violently in public without using the handkerchief.

Gargling the throat daily is a harmless, and may be, an efficient preventative.

This may be done on retiring at night and first thing in the morning, with twenty drops of liquor sodae chlorinate (an ornate name for chlorine water) in a tumbler of warm water.

Gargle the throat and douche the nose with this.

If you take Influenza (usually suddenly) don't try to fight against it, go to bed at once, and so assist your own cure and protect your neighbours."

In 1923, after an interval of 17 years, there was one case of smallpox in the City. The victim was a man of 24, employed as a correspondence clerk at one of the large engineering works in the City, who had never been vaccinated and who had gone to work in a roomful of clerical staff for two or three days with the rash well established. Dr Johnstone attributes the escape of those other members of the staff to the efficiency of vaccination while serving with the Forces during the war, and to the prompt re-vaccination and primary vaccination of those not protected.

In 1927, Dr. Johnstone reported " one definitely determined case of food poisoning " and stated that it was extremely uncommon for this to be recorded in the Annual Report of the City of Peterborough. This was due to Bac. Morbificans Bovis and resulted in a married woman of 51 dying. Dr. Johnstone went on to say that it was authoritatively stated that this Peterborough case was the second in recent times to be caused by this strain of organism.

In the same year the Public Health (Smoke Abatement) Act, 1926, came into force and in September of that year the Town Council put the administration of the Act on the police.

1928 saw the beginning of an outbreak of smallpox in Peterborough and environs. There appeared to be two phases in the outbreak, the first from the 22nd April to the 30th May and the second from June to the end of the year. In that year there were 46 cases in Peterborough and a total of 66 cases in the area. It is interesting to note that 80% of the Peterborough cases occurred in persons who had not been vaccinated, and that 6 had not been vaccinated within 29/72 years of infection. The outbreak continued into 1929 and emergency measures had to be instituted for the accommodation of those infected. The Smallpox Hospital being too small, a medical hut, which would accommodate 14 persons, was rapidly acquired from Papworth Industries and erected at the Smallpox Hospital in a matter of a few days. This brought accommodation up to 42 beds. Early in February it was evident that this accommodation was not sufficient and the Fever Hospital was taken over for the reception of smallpox patients and, later still, Bourne Rural District Isolation Hospital admitted a limited number of Peterborough cases. In all, there were 231 cases in Peterborough and of these, 193 or 82% occurred amongst unvaccinated persons. It is also of interest to note that 125 of the 231 cases occurred in the 5-15 year old age group, that is largely amongst school children.

By the Peterborough Extension Act, 1928, the City boundaries were extended and over 800 acres were added to the City " at every compass point except the South, taking in about 4,800 fresh population." The population of Peterborough in 1929 was estimated to be 42,990.

In 1932, Dr. Johnstone expressed great concern about the number of uncertified deaths in Peterborough. It appears that 25 persons " came to their end during 1932 without a certifiable cause, which works out at a percentage 5 times worse than the country generally." Dr. Johnstone goes on to say " this is most unsatisfactory, and smacks of a state of uncivilisation which, in this *anno domini*, is nearly beyond belief."

Also, in this year, he was pleased to report that the cancer death rate in Peterborough was below that of England. He comments that in the last 12 years the local cancer death rate had only been lower than that for England on 3 occasions.

In 1936, Dr. Johnstone comments on influences inimical to the health of the inhabitants and refers to the flying of Service airplanes over the City and its immediate environs, by day as well as by night. He said that the day-flying interferes with rest and recuperation of night-workers, and that night-flying correspondingly denies proper rest to day-workers. The din, he said, was not like road traffic, " capable of being got used to, but an impinging row with vibratory element of an order that is devastating and mandatorily distracting." He further said, that carrying out examinations of school children in an area " much pestered by the unwelcome hoardes," was almost useless and that the results could hardly be taken as worthy of record, and went on to appeal for an abatement of the nuisance and transference of the flying to a site better adapted for the purpose. (It is just as well that Dr. Johnstone was not carrying out his examinations in the super-sonic era).

The 1939 report was much briefer than its predecessors and it appears that the advent of war knocked the bottom out of all the good work which had been put in " on measures taken for the eradication of overcrowding in the City," which had been almost completely eliminated by the autumn of 1938, only to witness a return in autumn 1939 by the war-time measure of billeting. The advent of war also put the slum clearance programme out of joint.

In this year, the number of cases of diphtheria was reduced to 16, as compared with 84 in 1938, and Dr. Johnstone felt that the intensification of the immunisation drive in February, March and April of that year had some effect.

The Annual Reports of the war years were printed in 2 volumes and were mainly statistical. The report for the years 1943-44 was presented on V-J Day, 1945, and in it, Dr. Johnstone commented that diphtheria immunisation was making steady progress up to the requisite 75% protection, both for pre-school and school-age children.

The post-war reports are by no means as full or as interesting as those of the inter-war years, and in his 1948 report, which is the last that Dr. Johnstone wrote, he makes no reference at all to the handing over of the personal health services to the County Council. The giving up of these services must have been a sad blow to Dr. Johnstone, for he had seen them grow from almost nothing, to services of which any City could be proud. He resigned his post as Medical Officer of Health in August, 1949, as a result of ill-health.

It was not until 1st January, 1950, that Dr. Crawshaw took up his duties as Medical Officer of Health for the City. Drs. W. A. Hawes and Henrietta Young, acting as Medical Officers of Health in the interim period.

It might be of interest to compare some of the statistics available since the first Medical Officer of Health was appointed and, with this in view, the following table was compiled :—

Year	*Population*	*Death Rate*	*Birth Rate*	*Infant Mortality Rate*
1875	18,000	22·2	—	—
1896	27,693	12·45	25·38	—
1900	29,296	14·71	27·78	148·0
1910	*36,003	9·77	19·50	75·5
1920	34,752	12·8	25·4	66·6
1930	43,340	11·4	15·8	68·8
1940	—	12·99	14·6	55·0
1950	54,700	11·9	14·8	23·4
1956	54,380	11·42	18·52	30·61

* Figure for census of 1911 was 33,574.

It is interesting to note from the foregoing brief history, that in the 76 years from 1873-1949, there were only 5 Medical Officers of Health in Peterborough, and since 1950 there have already been 3. This is, no doubt, due to the fact that since handing over the personal health services to the County Council, the status of the City Medical Officer has declined. However, should the recommendations of the White Paper regarding Local Government functions come into effect, and be applied to Peterborough, many of the functions formerly held by the City Council will be returned and, no doubt, Medical Officers of the future will tend to remain longer.